

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO.  | DATE    |
|---------------------|----------|---------|---------|
| FEE DETERMINATION   | D.B.     | 70200   | 2-24-99 |
| O.I.P.E. CLASSIFIER | MTN      | 59      | 6-25-99 |
| FORMALITY REVIEW    |          | 6/27/99 | 7/15/99 |

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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